Hawaii Employer-Union Health Benefits Trust Fund 2008-2009 Retiree Rates Effective July 1, 2008

Benefit Plan	Type of Enrollment	Premium
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MEDICAL PLANS - MEDICARE		
EUTF PPO Medicare (HMA)	Self	\$284.30
NMHC Prescription Drug	Two-Party	\$553.98
	Family	\$821.28
EUTF PPO Medicare (HMSA)	Self	\$289.90
NMHC Prescription Drug	Two-Party	\$564.92
	Family	\$837.48
Kaiser Medicare HMO	Self	\$232.08
Prescription Drug	Two-Party	\$452.94
	Family	\$671.12
MEDICAL PLANS - NON MEDICARE		
EUTF PPO Non Medicare (HMA)	Self	\$403.84
NMHC Prescription Drug	Two-Party	\$786.92
	Family	\$1,166.60
EUTF PPO Non Medicare (HMSA)	Self	\$412.42
NMHC Prescription Drug	Two-Party	\$803.66
	Family	\$1,191.42
Kaiser Non Medicare HMO	Self	\$470.00
Prescription Drug	Two-Party	\$916.86
	Family	\$1,358.72
DENTAL PLAN		
HDS Dental	Self	\$30.18
	Two-Party	\$58.98
	Family	\$72.22
VISION PLAN		
VSP Vision	Self	\$4.42
	Two-Party	\$8.84
	Family	\$11.88
LIFE INSURANCE		
Standard Life Insurance (Retiree only)	Self	\$4.16
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